

Clinical Evaluation of Phalatrikadi Kvatha in the Management of Artavakshaya (Oligomenorrhea)

Dr. Rudramani Deepak¹, Dr. Shiv Kumar², Dr. Vikas³, Shilpa Rani⁴, Dr. Varun Maithani⁵, Dr. Krishna Meher⁶, Gajendra Singh Patra⁷

¹Professor, Dept. of Kayachikitsa, Shivalik Ayurvedic Medical College & Hospital, Uttar Pradesh, India

²Assistant Professor, Dept. of Rachana Sharir, Lal Bahadur Shastri Mahila Ayurvedic College, Haryana, India

³Assistant Professor, Dept. of Rasa Shastra Evum Bhaishjya Kalpana, Satya Ayurvedic Medical College & Hospital, Haryana, India

⁴Tutor, Dept. of Anatomy, M.M. College of Medical Sciences & Research, Haryana, India

⁵Assistant Professor, dept. of Rachana sharir, Prabuddh ayurvedic medical College, Hospital & research Center, Lucknow, India

⁶Assistant Professor, Dept. of Prasuti Tantra & Stri Roga, Sri Sri Nrusinghnath Ayurved College research Institute, Odisha, India

Abstract- Background: Artavakshaya, as described in Ayurvedic classics, refers to reduced quantity, delayed onset, or shortened duration of menstrual bleeding. It is a growing concern among reproductive-age women due to lifestyle disturbances, stress, nutritional imbalances, and hormonal disorders such as polycystic ovarian disease (PCOD). In modern terms, it aligns closely with oligomenorrhea—a condition characterized by infrequent menstrual cycles with intervals exceeding 35 days. **Aim:** To assess the therapeutic effect of Phalatrikadi Kvatha, a classical polyherbal formulation, in normalizing the menstrual cycle and improving flow in a patient diagnosed with Artavakshaya. **Methodology:** A single case of a 23-year-old female presenting with irregular and scanty menstruation for one year was studied. Phalatrikadi Kvatha was administered at a dose of 40 ml twice daily for 45 days. The patient was monitored for changes in menstrual interval, flow duration, quantity of bleeding, and associated symptoms like weakness and hair fall. **Results:** Post-treatment, the menstrual interval improved from 42 to 32 days, the duration of bleeding increased from 1 to 3 days, and associated symptoms were significantly reduced. **No side effects were observed during the intervention.** **Conclusion:** Phalatrikadi Kvatha exhibited promising efficacy in regulating the menstrual cycle and enhancing blood flow in Artavakshaya, likely due to its Rasayana, Agnivardhaka, and Tridosahara properties. This case supports its potential as a safe, non-hormonal option in managing functional menstrual irregularities.

Keywords: Artavakshaya, Oligomenorrhea, Phalatrikadi Kvatha, Ayurvedic Gynecology, Menstrual Irregularity, Apana Vata Dushti

INTRODUCTION

The regularity and adequacy of menstrual cycles are fundamental indicators of a woman's reproductive health. Menstrual disturbances such as Artavakshaya, which denotes reduced or delayed menstruation, are increasingly prevalent due to modern lifestyle changes, dietary errors, mental stress, and hormonal imbalances. In Ayurveda, Artavakshaya is considered both a disease and a symptom of systemic imbalance, often arising from Apana Vata Dushti, Rasa-Rakta Dhatu Kshaya, or Avarana (obstruction of Vata by Kapha or Meda).

In modern medicine, oligomenorrhea refers to infrequent menstruation, usually defined as cycles longer than 35 days. It may be idiopathic or associated with underlying causes like PCOD, thyroid dysfunction, or stress-induced hypothalamic disturbances. Conventional management typically involves hormonal regulation, which may offer symptomatic relief but often leads to side effects or recurrence.

Ayurveda offers a holistic approach to menstrual disorders by addressing underlying doshic

disturbances, enhancing Dhatu nourishment, and improving Agni (digestive fire). Phalatrikadi Kvatha is a classical herbal decoction mentioned in Ayurvedic texts with ingredients like Amalaki (*Embolica officinalis*), Haritaki (*Terminalia chebula*), Bibhitaki (*Terminalia bellirica*), Guduchi

AIMS AND OBJECTIVES

Aim:

- To evaluate the therapeutic effect of Phalatrikadi Kvatha in the management of Artavakshaya (Oligomenorrhea).

Objectives:

- To assess the effect of Phalatrikadi Kvatha on the menstrual cycle interval and duration of flow.
- To evaluate changes in the quantity of menstrual bleeding.
- To observe improvements in associated clinical symptoms such as weakness and hair fall.

- To assess the safety and tolerability of the formulation during the treatment period.

MATERIALS AND METHODS

Study Design:

Single-case observational study.

Study Site:

Conducted at the OPD of Prasuti Tantra & Stree Roga Department.

Inclusion Criteria:

- Women aged 18–30 years
- History of oligomenorrhea (cycles >35 days)
- No history of hormonal medication in the last 2 months

Exclusion Criteria:

- Severe systemic illness
- Organic pelvic pathology (fibroids, endometriosis)
- Hormonal therapy during the study period

Assessment Criteria:

Parameter	Assessment Tool
Cycle Interval	Days between periods
Duration of Bleeding	Number of bleeding days
Quantity of Flow	Number of pads used per day
Associated Symptoms	Clinical history & patient report

Case Profile

Parameter	Details
Name	Ms. S.R.
Age	23 years
Menstrual history	Irregular cycles (40–45 days), flow only 1 day, scanty
Duration of illness	12 months
Associated complaints	Weakness, mood swings, hair fall
Personal history	Vegetarian, moderate appetite, disturbed sleep
Clinical diagnosis	Artavakshaya (Oligomenorrhea)
Prakriti	Vata-Pittaja
Menstrual examination	Delayed, scanty, non-clotted bleeding
USG Abdomen	Polycystic ovaries (mild)

Investigations:

- Baseline USG – Mild PCOD
- Hemogram – Within normal limits
- Thyroid Profile – Normal

General Examination

Parameter	Observation
Height	160 cm
Weight	54 kg
BMI	21.1 kg/m ²
Pulse	76/min, regular
Blood Pressure	108/72 mmHg
Temperature	Afebrile
Pallor	Absent
Icterus	Absent
Oedema	Absent
Lymphadenopathy	Not Present
Tongue	Slightly coated
Nail & Hair	Hair fall present
Skin	Dry, normal texture
Mental Status	Alert and oriented

Gynaecological History

Parameter	Details
Menarche	At age 13
Cycle Pattern	Initially regular, irregular for last 1 year
Present Cycle Length	40–45 days
Duration of Flow	1 day only
Flow Quantity	Very scanty, <1 pad/day
Pain	No significant dysmenorrhea
Vaginal Discharge	Absent
Contraceptive Use	None
Family History	Mother had similar complaints in youth
Sexual History	Not applicable

Clinical Examination / Gynecological Findings

Abdominal Examination:

- No tenderness
- No palpable mass
- No organomegaly
- Normal bowel sounds

Pelvic Examination:

(Not done as patient is unmarried; USG findings used instead)

Ultrasound Findings:

Ovaries: Mildly enlarged with peripheral follicle arrangement (string of pearls)

Suggestive of: Polycystic Ovarian Morphology

Local Examination (General):

External genitalia normal
No abnormal discharge or lesion

Laboratory Investigations:

Test	Result	Reference Range
Hemoglobin	12.4 g/dL	12–16 g/dL
TSH	2.1 μ IU/mL	0.4–4.0 μ IU/mL
FSH	6.5 IU/L	4.7–21.5 IU/L (follicular phase)
LH	8.2 IU/L	5–20 IU/L
USG Pelvis	Mild PCOD pattern	

Treatment Protocol

Drug	Dose	Anupana	Duration	Mode
Phalatrikadi Kvatha	40 ml twice daily	Lukewarm water	45 days	Oral

Assessment Criteria

- Menstrual interval (days)
- Duration of flow (days)
- Quantity of flow (number of pads used/day)
- Associated symptoms (weakness, PMS, etc.)

Results – Before & After Treatment

Parameter	Before	After (45 Days)
Cycle interval	42 days	32 days
Duration of flow	1 day	3 days
Flow quantity	Scanty (1 pad/day)	Moderate (2-3 pads/day)
Associated symptoms	Weakness, hair fall	Reduced significantly

Follow-Up:

Patient was reviewed every 15 days during the treatment period for clinical progress and adverse effects.

Before and After Treatment – Statistical Observation:

Parameter	Before Treatment	After 45 Days of Treatment	% Improvement
Menstrual Cycle Interval	42 days	32 days	↓ 23.8% (more regular)
Duration of Bleeding	1 day	3 days	↑ 200%
Quantity of Bleeding	Scanty (1 pad/day)	Moderate (2–3 pads/day)	Subjective ↑ (qualitative)
Weakness/Fatigue	Present	Significantly Reduced	Subjective ↓
Hair Fall	Mild to moderate	Mild; Improved	Subjective ↓
Mood Swings/Emotional Lability	Noted premenstrually	Minimal	Subjective ↓

- Improvements in menstrual regularity, duration, and associated symptoms were clinically significant.
- No adverse effects were reported during the treatment period.

- Subjective parameters (like fatigue, hair fall) were evaluated based on patient self-assessment during follow-ups.

DISCUSSION

Present case study demonstrates the successful use of Phalatrikadi Kvatha in managing Artavakshaya (oligomenorrhea) in a young female patient with mild polycystic ovarian morphology. The treatment outcome suggests that classical Ayurvedic formulations can provide effective and sustainable results in regulating the menstrual cycle without hormonal medications.

According to Ayurveda, Artavakshaya is caused primarily due to Vata dosha vitiation, especially Apana Vata, along with Rasa-Rakta Dhatu Kshaya or obstruction due to Kapha and Meda (Avarana). This results in decreased formation and delayed expulsion of Artava (menstrual blood). The modern understanding of oligomenorrhea often links it with hormonal imbalances, including LH/FSH ratio alteration, anovulation, and insulin resistance, especially in PCOD cases.

Phalatrikadi Kvatha, a combination of Triphala (Amalaki, Haritaki, Bibhitaki), Guduchi, and other Rasayana herbs, acts on multiple levels:

- Triphala is Tridosahara and acts as a mild laxative, thus aiding Apana Vata correction. Amalaki is a known antioxidant and Rasayana that nourishes Dhatus.
- Guduchi is a powerful Agnivardhaka and Rasayana, improving metabolism and immunity, which is vital in PCOD and stress-related menstrual dysfunction.

The formulation corrects Agni Mandya (impaired metabolism) and promotes Rasa and Rakta Dhatu formation, thereby improving Artava production and regularization of the cycle.

The 45-day intervention with Phalatrikadi Kvatha resulted in:

- Reduced cycle interval (from 42 to 32 days),
- Increased duration of flow (from 1 to 3 days),
- Improved flow quantity (from scanty to moderate),
- Significant reduction in associated symptoms like fatigue and hair fall.

Importantly, the patient reported no adverse effects, and the formulation was well tolerated. This highlights its safety for long-term use, especially in young women hesitant or unable to take hormonal therapies. This case aligns with the Ayurvedic principle that treating the root cause through Agni deepana, Vatanulomana, and Rasayana can restore natural menstruation. It also reinforces the relevance of Ayurvedic individualized treatment (based on Prakriti and Dosha assessment) in gynecological practice. However, as this is a single case study, generalizability is limited. Further clinical trials with a larger sample size and control groups are needed to establish conclusive evidence of efficacy.

CONCLUSION

The use of Phalatrikadi Kvatha in this case of Artavakshaya showed significant improvement in menstrual regularity, flow, and associated systemic symptoms. Its multifaceted actions—including Tridosha balancing, Rasayana, Agnivardhaka, and Vatanulomana—make it a rational choice for managing functional menstrual disorders like oligomenorrhea, especially in the context of early PCOD. This case supports the classical indication of Phalatrikadi Kvatha and suggests that traditional Ayurvedic formulations, when appropriately selected, can offer effective, safe, and non-hormonal alternatives in women's health.

It is recommended that:

- Larger clinical studies be undertaken to validate these findings.
- Long-term follow-up be included to assess recurrence and sustained benefits.
- Integration with lifestyle and diet modifications be explored further to enhance outcomes.

Phalatrikadi Kvatha thus represents a holistic, evidence-based approach to menstrual regulation rooted in the timeless wisdom of Ayurveda.

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